IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Bin Zhao

Application No.: 10/016,166

Filed: 11/30/2001

For: Low Dispersion Filters

Group No.: 2872

Examiner: John Juba, Jr.

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is a small entity. A statement was already filed.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

> \$55.00 Fee:

62/05/2004 PBRITTON 00000001 502191

01 FC:2814

55.00 DA

CERTIFICATE OF FIRST CLASS MAILING (37 C.F.R. Section 1.10/1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Barbara Hayashi

01/16/2004 CHGUYEN 00000077 502191

)1 FC:2251

55.00 DA

Amendment Transmittal-page 1 of 2

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2)		(Col. 3)		4		SMALL	SMALL ENTITY		
	CLAIMS		•								
	REMAINING	HIGH	EST NO.					•			
	AFTER		IOUSLY	PRE	SENT					ADDIT.	
	AMENDMENT	PAID FOR		EXTRA		RATE			FEE		
TOTAL	. 4	-	20	=	0	x	\$.	9.00	=	\$	0.00
INDEP.	. 4		4	=	0	х	\$	43.00	=	\$	0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							\$	0.00	=	\$	0.00
								TOTAL			
							AI	DIT. FEE		\$	0.00

No additional fee for claims is required.

FEE PAYMENT

5. Authorization is hereby made to charge the amount of \$55.00 to Deposit Account No. 502191.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. An additional extension and/or fee is required, charge Account No. 502191.

An additional fee for claims is required, charge Account No. 502191.

Date: 12 5 ... 04

Reg. No.: 30455

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Signature of Practitioner

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